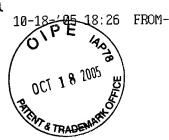
## PART B - FEE(S) TRANSMITTAL

amplete and send this form, together with applicable fee(s), to: Ma						
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000 TBESHAH2	00019 500510 09891	717		Stanley D	. Perence III	(Depositor's name)
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09/891,717			Hideo Saki	i	JP920000104US1	1831
TITLE OF INVENTION:	SYSTEMS AND METHODS					
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XXXFee Address" indic PTO/SB/47; Rev 03-02 Number is required.	ndence address (or Change of 122) attached. ation (or "Fee Address" Indice or more recent) attached. Us D RESIDENCE DATA TO B	ation form e of a Customer	or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  THE PATENT (print or type)			
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This collection of informat an application. Confidentia submitting the completed a this form and/or suggestion Box 1450, Alexandra, Vir Alexandria, Virginia 2231;	ion is required by 37 CPR 1.3 lity is governed by 35 U.S.C. application form to the USPT 15 for reducing this burden, st prints 22313-1450. DO NOT 5-1450.	11. The information 122 and 37 CFR 0. Time will vary could be sent to the SEND FRES OR C	m is required to obtained to the last of t	ain or retain a benefit by t in is estimated to take 12 : ie individual case. Any co i Officer, U.S. Patent and IMS TO THIS ADDRESS	the public which is to file (an minutes to complete, includi annuents on the amount of ti Trademark Office, U.S. Dep S. SEND TO: Commissioner	d by the USPTO to process ng gathering, preparing, and me you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450,

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## **MESSAGE:**

Application No. 10/044,649 Examiner Huyen X. Vo Art Unit 2655

Issue Fee Transmittal (in duplicate) Fee Address Indication

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